BEST AVAILABLE COPY

								Application or Docket Number									
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 56300USA6A-0													2				
CLAIMS AS FILED - PART I (Column 1)						(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS			22				F	RATE	FEE		RATE	FEE					
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	Ì				
TOTAL CHARGEABLE CLAIMS			22 minus 20=		. 2		\rightarrow \r	(\$ 9=	36.0	m _B	X\$18=	3600	0				
INDEPENDENT CLAIMS			5 minus 3 =		. 2			(40=	2000	1	X80=		_				
мυ	LTIPLE DEPEN	DENT CLAIM PI	RESENT							OR		160=					
* If	the difference	in column 1 is	less than ze	ro ente	r "Ω" in c		135=		OR	+270=							
"			less than zero, enter "0" in column 2 MENDED - PART II			T	OTAL		OR	•	9060	Pί					
	C	(Column 1)	MIENDED	Colu		S	MALL	ENTITY	OR	OTHER SMALL							
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=						
	Independent	*	Minus	***		=		<40=		OR	X80=						
ַ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			135=		1	+270=						
							L	TOTAL		OR	TOTAL		ł				
	(Column 1) (Column 2) (Column 3)							IT. FEE	L	OR	ADDIT. FEE		1				
	SC GENORA	(Column 1) CLAIMS	# 10 £ 10	· •	mn 2) HEST	(Column 3)			ADDI	1		ADDI	ł				
AMENDMENT B	12 14 14 14 14 14 14 14 14 14 14 14 14 14	REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	*	Minus	**		=	\ \ \ \	(\$ 9=		OR	X\$18=						
	Independent	*	Minus	***		=)	4 0=		OR	X80=		1				
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM			135=		1	+270=						
							Ľ	TOTAL		OR	TOTAL		ł				
				(0.1	ο,	(0.1	ADE	IT. FEE		OR	ADDIT. FEE	L	1				
	SA 35' SA 38.2 '	(Column 1) CLAIMS			mn 2) HEST												
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=						
	Independent	*	Minus	***		=	>	(40=		OR	X80=		1				
	FIRST PRESE	ULTIPLE DE	TIPLE DEPENDENT		「CLAIM		125		1	, 270		1					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		Į				
**	If the "Highest Nu If the "Highest Nu	mber Previously P Imber Previously P	aid For" IN THI aid For" IN TH	S SPACE IS SPACE	** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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